Early nursing theorists sought to identify the major philosophical, epistemological and professional dimensions of nursing practice. How we think about nursing, describe it and envision its possibilities can all be traced to the influence of nursing theorists. New nursing knowledge is often revealed through the lens of nursing theory, and imagining the future of nursing starts with the foundation theory provides.

Nurses continue to resist embracing nursing theory as a foundation for practice. Familiar objections to adopting theory as a guiding process include using convoluted concepts when straightforward language would suffice and failing to translate theory into practice. My experience teaching nursing theory to nurses tells me that the key to acceptance is the degree to which a specific theory resonates with the heart of the nurse. The greater the heart connection, the greater the invitation to explore the potentiality a theory holds for that nurse’s practice. This is not to discount the intellectual scholarship and meaningful dialogue that theory engenders; rather it is to shine light on an authentic way of knowing that some nurses have chosen to guide their nursing experience.

In line with their knowing, many nurses draw from more than one nurse theorist to portray their approach to practice. This trans-theoretical perspective offers nurses greater variety and ease in assimilation of theoretical concepts congruent with their worldview. Watson and Smith (2002) find a trans-theoretical position maintains the integrity of the different theories, while facilitating and inviting new discourse for nursing science.

For this reason, holistic nursing theory serves as one of several core content areas of study within the Integrative Healing Arts Certificate Program (IHAP) at The Birch Tree Center in Florence, Mass. Nurse participants in this program have written reflective papers describing their understanding of one theorist’s work and the influence that body of work has had on their practice. With their permission, I have included excerpts from their writings and gratefully acknowledge the impact their knowing has on my continuing journey in nursing theory.

THEORY continued on page 12
Julia, a critical care nurse, writes: "Every client has a cultural history, which impacts the outcome of today’s interactions. Madeline Leininger’s Transcultural Nursing Model theory (see page 13 for explanation of theories) calls one to fully recognize the multifaceted image of each individual before us. Leininger is highly relevant, and thus challenges me to preserve, negotiate and re-pattern my client’s care according to their cultural, spiritual and ethnological perspectives. I know that acceptance, adjustment and re-structuring open the door to channeling the caring potential and advancing healthy well-being."

Donna shares: "I have often applied Margaret Newman’s theory Health as Expanding Consciousness to my clinical practice. I believe that this theory helps to deliver care that is nonjudgmental, noninterventionist and involves being with rather than doing for the patient. The concepts of this theory are broad in scope and relate to health as a whole. As a Hospice nurse, I can fully recognize and appreciate the pattern that manifests for each patient, and I assist them in understanding these patterns as a means of achieving a higher state of consciousness. I am able to view my patients as being in a state of health, regardless of the presence of pathology."

Cathy is employed as a supervisor of a home care agency. She writes: "This is an incredibly powerful theory and speaks to me about why I am a nurse. I chose Jean Watson’s Theory of Human Caring because she has a spiritual basis, and my own call to nursing was from a place of spiritual suffering. The concept of caring was not unfamiliar to me, but it was really framed by the medical model. Caring did not feel like what it feels like when you add the spirituality to it and liberate it by measuring it in a phenomenological fashion. Simply put, it feels right to heighten the caring relationship by acknowledging spirit."

Lois works with families and patients challenged with Alzheimer’s disease. This excerpt describes her relationship with Martha Rogers’ Science of Unitary Beings in the clinical setting: “When family visits the dementia unit, I sense their energy and offer a buffer environment via therapeutic presence. This is an opportunity for family to de-stress and get filled with positive vibes before visiting and interacting with their family member. I walk with the family member to the resident and create a positive environment for interacting: quiet, uncluttered, comfortable. After the visit, I interact with the family member. I am present in a therapeutic manner and listen to their concerns and comments. I do not control the process; I am present. When the family member leaves the unit, I follow up with the resident to assess and interact as needed to support the unitary human being. This is more than total patient care. This is an attempt to consider the changing energy fields, the total environment that impacts a resident. It is an attempt to promote wholeness through openness and therapeutic presence.”
Each one of these nurses speaks of how theory has touched them personally by enlightening their experience and informing their practice. As Cathy writes later in her paper about Watson’s theory: “It speaks to me in that place I call my Knowing Place. It fits for me and honors all of humanity as one. It is truth for me.” It is an important aspect of nursing theory to illuminate nurses’ multiple ways of knowing and validate that knowing (Boykin & Schoenhofer, 1993). As nurses grow in relationship with nursing theory, their own unique ways of knowing are further validated by the concepts they encounter. Holistic nursing theory offers them a foundation for practice that honors a way of knowing that begins in the heart.

References

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Nurse Theorists at a Glance

Madeleine Leininger
A nurse anthropologist, Leininger’s Theory of Culture Care Diversity and Universality (TCCDU) postulates that caring and culture are inextricably linked. Caring is the essence of nursing, and the dominant, distinctive and unifying feature of nursing. Professional actions and decisions help clients re-order, change or greatly modify their life ways for new, different and beneficial health care patterns in a culturally congruent way. The goal of TCCDU is to develop a scientific and humanistic body of knowledge in order to provide culture-specific and culture-universal nursing practices.

Margaret Newman
In Newman’s theory, Health as Expanding Consciousness, the nurse uses pattern recognition to assist the person to make changes that result in higher levels of human consciousness. In this relationship, the nurse creates an authentic involvement of himself or herself with the person in which there are open channels of dialogue (active listening, presence and intentionality, empathetic understanding, and unconditional acceptance) giving the person freedom of self-reflection and personal autonomy. A nurse/person intervention is not intended to fix the person’s problems from a medical diagnosis standpoint; rather it is to provide individuals with an opportunity to know themselves, to find meaning in their lives and to gain insight for the future.

Martha Rogers
Science of Unitary Beings is built on her basic assumption of human beings existing as dynamic, unified, irreducible, multidimensional, open energy fields continuously exchanging matter and energy with dynamic energy fields. Energy fields are distinguished by patterns that remain abstract until they are perceived through their specific manifestations. Nursing care is focused on pattern appraisal, and nursing interventions are derived from the knowledge of the pattern.

Jean Watson
Watson’s Theory of Human Caring states that nursing is a human science dealing with health, illness and healing through transpersonal, inter-subjective relationships, in which the nurse uses professional, personal, scientific, aesthetic and ethical knowledge. Her Clinical Caritas Processes focus on the following approaches: developing an authentic caring relationship, being fully present, attending to basic needs with caring consciousness, engaging in the artistry of caring-healing practices and ministering to the spiritual needs of the person. Watson will be a keynote speaker at the AHNA 2005 national conference, Holism and Diversity: A Paradigm of Caring (see conference announcements on page 17).

Theorist Reading List
Nursing Theory web page: www.sandiego.edu/nursing/theory/